

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Title::	SURGICAL SUPPORT ARM DOCKING APPARATUS
Attorney Docket Number::	M81.12-0066
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	20
Small Entity?::	Yes
Petition included?::	No
Petition Type::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Given Name::	Todd M.
Family Name::	Bjork
Name Suffix::	
City of Residence::	River Falls
State or Province of Residence::	WI
Country of Residence::	US
Street of Mailing address::	N7259 820th Street
City of Mailing address::	River Falls
State of Province of mailing address::	WI
Country of mailing address::	
Postal or Zip Code::	

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Given Name:: Todd W.
Family Name:: Sharratt
Name Suffix::
City of Residence:: Birchwood
State or Province of Residence:: MN
Country of Residence:: US
Street of Mailing address:: 613 Wildwood Avenue
City of Mailing address:: Birchwood
State of Province of mailing address:: MN
Country of mailing address::
Postal or Zip Code::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Given Name:: Christopher Lee
Family Name:: Berg
Name Suffix::
City of Residence:: Crystal
State or Province of Residence:: MN
Country of Residence:: US
Street of Mailing address:: 6917 50th Avenue North
City of Mailing address:: Crystal
State of Province of mailing address:: MN
Country of mailing address::
Postal or Zip Code:: 55428

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Given Name:: Walter J.
Family Name:: Dobrovolny
Name Suffix::
City of Residence:: St. Paul
State or Province of Residence:: MN
Country of Residence:: US
Street of Mailing address:: 325 Wilder Avenue North
City of Mailing address:: St. Paul
State of Province of mailing address:: MN
Country of mailing address::
Postal or Zip Code:: 55014

Comments: Repeat the above for each inventor

Correspondence Information

Name:: Z. Peter Sawicki
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State or Province of mailing address:: MN
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E-Mail address:: psawicki@wck.com

Representative Information

Representative Designation::	Registration Number::	Representative Name:
Primary	20147	Nickolas E. Westman
Primary	34797	Judson K. Champlin
Primary	34847	Joseph R. Kelly
Primary	36188	Steven M. Koehler
Primary	34557	David D. Brush
Primary	38354	John D. Veldhuis-Kroeze
Primary	39758	Theodore M. Magee
Primary	35612	Deirdre Megley Kvale
Primary	42413	Christopher R. Christenson
Primary	41885	Brian D. Kaul
Primary	45466	Nathan M. Rau
Primary	45844	Christopher L. Holt
Primary	45956	Alan G. Rego
Primary	48516	Todd R. Fronek
Primary	49027	Linda P. Ji
Primary	53675	Leanne R. Taveggia
Primary	24383	Robert M. Angus
Primary	32015	David C. Bohn
Primary	30214	Z. Peter Sawicki
Primary	48774	Peter J. Ims
Primary	51655	Bryan F. Erickson

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional of	60/504,080	9/19/03

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

Assignee Information

Assignee name:: Minnesota Scientific, Inc.
Street of mailing address:: 4849 White Bear Parkway
City of mailing address:: St. Paul
State or Province of mailing address:: MN
Country of mailing address::
Postal or Zip Code of mailing address:: 55110-3325